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SECRETARY OF THE SENATE
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13 OCT 25

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Bob Corker for Senate 2018, Inc.

ADDRESS (number and street)

1015 Stonebridge Park Drive



Check if different than previously reported. (ACC)

Franklin

TN

37069

2. FEC IDENTIFICATION NUMBER ▼

C C00430462

3. IS THIS REPORT

☒ NEW (N)

OR

☐ AMENDED (A)

ZIP CODE

STATE ▼ DISTRICT

TN

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY
07 / 01 / 2013

MM / DD / YYYY
01 / 01 / 2013

MM / DD / YYYY
01 / 01 / 2013

through

MM / DD / YYYY
09 / 30 / 2013

MM / DD / YYYY
09 / 30 / 2013

MM / DD / YYYY
09 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kimberly Kaegi

Signature of Treasurer

Kimberly Kaegi

Date

MM / DD / YYYY
10 / 04 / 2013

MM / DD / YYYY
10 / 04 / 2013

MM / DD / YYYY
10 / 04 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 02/2003)